App. No. 10/569404 Atty. Dkt. No. 19.106011

Conclusion

In light of the above Remarks, Applicants respectfully request that a timely Notice of Allowance be issued in this case. If the Office should have any questions or other issues to discuss, please do not hesitate to contact the undersigned attorney.

The Examiner is hereby authorized to charge the Deposit Account No. 50–2855 for any actual deficiency. The Examiner is also authorized to credit any overpayment to Deposit Account No. 50–2855.

3/21/11

Respectfully submitted,

____/Lindsay G. McGuinness/____ Lindsay McGuinness Reg. 38,549 Attorney for Applicant USPTO Customer No. 38732 Hologic Inc. 250 Campus Drive Marlborough, MA 01752

Tel: 508-263-8504 Fax: 508-263-2859